

# Decision Support for Assessing Patient Preferences for Geriatric Care

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We propose to develop a computer-based decision support system (DSS) for geriatric assessment. A prerequisite for effective rehabilitation of elderly patients with impaired functional health is to assess their capability to care for themselves. An important part of this assessment is determining patient preferences for self-care.

In the proposed DSS patients' appraisal of their needs, values and desired outcomes are systematically included in patient assessment. The DSS uses principles of normative decision theory to decompose the complex task of assessing patients' self-care capability into its elemental factors; it allows the nurse and the patient to assess the level of patients' self-care capability and to identify desired levels of outcome states for each component separately. The technique combines nurses professional judgment with patient preferences for self-care in order to incorporate patients' preferences for outcomes in the care planning process. Lorensen's Self-Care Capability Scale (LSCS)<sup>1,2</sup>, comprising 13 self-care capability dimensions is utilized to represent the components of self-care in the model.

The purpose of this pilot study was to refine the core assessment strategy in a non-computerized form. The sample consisted of 12 clients, four in a geriatric inpatient setting and eight in a center for elderly. After completing the assessment, subjects were interviewed to clarify the usefulness of this tool as decision aid to establish priorities for care planning.

Patients in the inpatient setting reported that the approach to patient assessment was helpful to clarify their goals, ranging from "somewhat" to "very"; it provided important information about their ability to independent

self-care functioning and to create a shared understanding between nurse and patient. The participating nurses reported that the tool was very helpful to get to know the patients' strengths and weaknesses in independent self-care functioning. The shared approach provided an opportunity for increased communication and clarification between patient and nurse and created a shared understanding of desired outcomes, priorities and patient values through discussion and negotiation. Participants in the elderly center strongly advocated that they wanted to be highly involved in deciding what was important to them in their care. Being systematically asked about their preferences was highly valued.

Preliminary findings suggest that there are variations in preferences for self-care capability related to gender and physical health. This study supports previous literature that there is a substantial difference in values patients place on clinical outcomes; it highlights the importance of an individual approach to patient assessment. The study also reaffirms the usefulness to include principles of normative decision theory as elicitation technique in the development of DSSs. This approach can assist nurses in making care decisions consistent with patients preferences for outcomes.

## References

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